

ONE STOP PERMITTING

CITY OF BIRMINGHAM

DEPARTMENT OF PLANNING, ENGINEERING & PERMITS

710 20<sup>th</sup> Street North

ROOM 207, CITY HALL

BIRMINGHAM, ALABAMA 35203

William A. Bell, Sr., Mayor

Andre V. Bittas, Director

DEMOLITION PERMIT APPLICATION

Address Verified by \_\_\_\_\_ Modified By: \_\_\_\_\_  
P.I.D. No.: \_\_\_\_\_ Address Verified By: \_\_\_\_\_  
Modified Address: \_\_\_\_\_

Date \_\_\_\_\_  
Case No. \_\_\_\_\_  
Master No. \_\_\_\_\_  
Project No. \_\_\_\_\_

Please print or type legibly and fill in all that apply

Site Address: \_\_\_\_\_  
Location: (floor, wing, suite, etc.) \_\_\_\_\_  
Project Name \_\_\_\_\_

PROPERTY OWNER

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY/STATE/ZIP: \_\_\_\_\_  
PHONE:( ) CELLULAR:( )  
FAX:( ) PAGER:( )  
EMAIL: \_\_\_\_\_

STATE G.C. LICENSE NO. \_\_\_\_\_  
  
☐Contractor\* ☐Developer\* ☐Designer\* ☐Engineer\* ☐Tenant\*  
NAME: \_\_\_\_\_  
COMPANY NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY/STATE/ZIP: \_\_\_\_\_  
PHONE:( ) CELLULAR:( )  
FAX:( ) PAGER:( )  
EMAIL: \_\_\_\_\_  
  
\*Applicant is required to be authorized by owner to undertake work

CONTACT PERSON: \_\_\_\_\_ ADDRESS: \_\_\_\_\_  
CITY/STATE/ZIP: \_\_\_\_\_ PHONE:( ) CELLULAR:( )  
FAX:( ) PAGER:( ) EMAIL: \_\_\_\_\_

DESCRIPTION OF WORK: \_\_\_\_\_

BUILDING EXTREME DIMENSIONS: Length \_\_\_\_\_ Width \_\_\_\_\_ Height \_\_\_\_\_

CERTIFICATION OF STABILITY OF DEPENDENT STRUCTURE(S):

Are any other buildings or portions thereof dependent on this structure for support or stability? ☐Yes ☐No  
If yes, what steps have been taken to insure adequate structural stability in the remaining building, buildings or portions thereof? \_\_\_\_\_  
\_\_\_\_\_. ATTACH DETAILED STATEMNT AND/OR DRAWINGS

PROTECTION PLANS

- If the building to be demolished exceeds one story in height and is located less than 10 feet or less than ¼ of the height of the building from any street or alley or when the distance from a one story building to any street or alley is less than ½ the height of the building, a scaled and detailed plan indicating the method of protection to said public property shall accompany this application.

UTILITY SERVICES DISCONNECTED?

Have all utility services been disconnected by the respective utility companies? ☐Yes ☐No  
If no, will utility services be disconnected prior to start of demolition work? ☐Yes ☐No

CLASS TYPE

☐I- Less than 100,000 cu. ft. ☐II- Greater than or equal to 100,000 cu. ft.

FOR STAFF USE

CONSTRUCTION TYPE:

☐I ☐II ☐III☐IVP ☐IVU ☐VP ☐VU ☐VIP ☐VIU

CITY CONTRACTED JOB -

☐Yes ☐No No. Of Units \_\_\_\_\_ No. of Stories \_\_\_\_\_ No. of Rooms \_\_\_\_\_

OCCUPANCY TYPE:

☐ Large Assembly ☐ Small Assembly ☐ Business ☐ Educational ☐ Factory/Industrial

☐ Hazardous 1 ☐ Hazardous 2 ☐ Hazardous 3 ☐ Hazardous 4 ☐ Restrained

☐ Unrestrained ☐ Mercantile ☐ Mixed ☐ Residential 1 ☐ Residential 2

☐ Residential 3 ☐ Low Hazard Storage ☐ Moderate Hazard Storage

Sign off by Traffic Engineering required?

☐Yes ☐No

Condemned

☐Yes ☐No

Design Review Dist.

☐Yes ☐No

Protection Plans Required

☐Yes ☐No

Asbestos

☐Yes ☐No

Penalty Fee

☐Yes ☐No

Penalty Fee Waived

☐Yes ☐No

Permit Fee Waived

☐Yes ☐No

BOND AND INSURANCE INFORMATION

Name of Corporate Surety furnishing Demolition Bond

☐ The demolition of this structure is covered by a Surety Bond for this demolition only in the amount of \$ \_\_\_\_\_  
☐ The demolition of this structure is covered by an annual or blanket bond in the amount of \$ \_\_\_\_\_

Applies to blanket bond only - Date of Bond \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Bond No. \_\_\_\_\_ Expiration Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Name of Liability and Property Damage Insurance Company \_\_\_\_\_ Policy Number \_\_\_\_\_

Property Damage \$ \_\_\_\_\_ Personal Injury or Death (one person) \$ \_\_\_\_\_

Effective Date of Coverage \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Expiration Date of Coverage \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

\*If required, a Certificate of Insurance showing the existence of the herein described insurance coverage must be delivered to the Building Official prior to the issuance of the permit for the demolition or removal of this structure.

CERTIFICATION

I hereby certify that I have read this application and that all information contained herein is true. If any portion of this information, either intentionally or unintentionally, is false or is a misrepresentation of the material facts, the permit or process granted will be void. I further certify that if I am not the owner, I have proper authorization form the owner to act as representative on his/her behalf and that I may be required to provide written documentation of such authorization to the City of Birmingham.

Signature (Applicant)

\_\_\_\_\_

Date

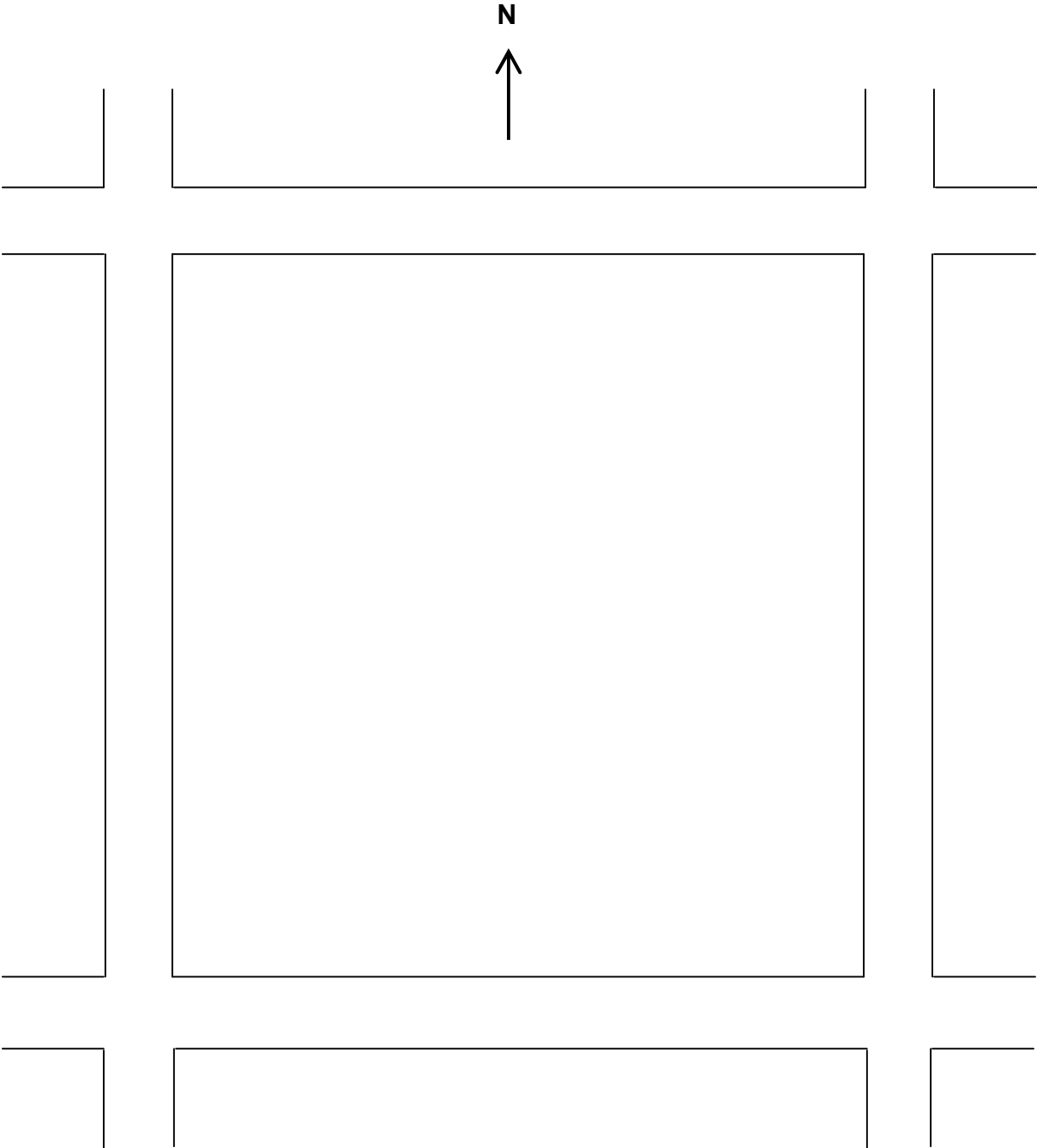
\_\_\_\_\_

Business License Number

\_\_\_\_\_

PEP 091201

LOCATION OF BUILDING



REMARKS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Building Photo

